MCG Today

Medical College of Georgia, Fall 1983, Vol. 12, No. 3, USPS 867340

Caring for the tiniest patients

BEHIND THE LINES

During the last three months we have greeted old friends at Homecoming, graduated almost 800 students and said good-bye to Dr. Moretz, a truly remarkable man and gracious president who guided us well for the last 11 years. Our collection of The Moretz Years, Homecoming 1983 pictures will bring back memories of a warm and exciting event.

This issue of MCG Today features a subject precious to us all — health care for children. Dedicated professionals at MCG are working in labs, clinics and the hospital to improve the health of children. During the last two decades infant mortality has been cut almost in half as a result of research, new technology and the efforts of these and other health professionals throughout the country.

Don't miss a related story on Dr. Leila Denmark, the third woman graduate of MCG. Eighty-five and still working full-time in pediatrics, she has strong views on child-raising and has presented them in her book.

Some other interesting articles in this issue cover the MCG humanities department and the neonatal intensive care unit at Talmadge.

In the next issue of MCG Today you will be brought up-to-date on heart research at MCG and the latest developments in the treatment of heart disease. You will probably be introduced to a new president. The MCG Presidential Search and Screen Committee has given the chancellor the names of four nominees and he has indicated he will try to have a recommendation for the August meeting of the Board of Regents. As we go to press, Dr. Harry O'Rear has just been named Interim President effective July 1. He will serve until the new president is installed.

J.C.A.

MCG Today

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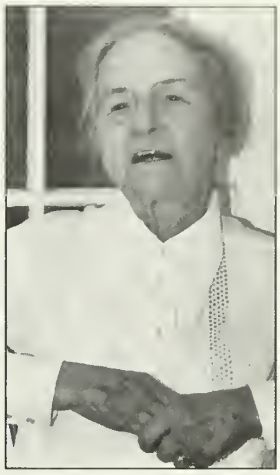

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CAMPUS NEWS

Graeme M. Keith, left, vice-chairman of the First Railroad and Banking Co., accepts a certificate from Charles B. Presley, chairman of the President's Advisory Council of the Medical College of Georgia for his outstanding leadership in the successful $250,000 fund drive for the MCG Research Institute. Presley, who is chairman of the First Railroad and Banking Company, made the presentation during a recent PAC dinner meeting in Augusta.

Match Day places 90 percent of medical students in top choices

Many senior medical students realized their dreams come true during Match Day in March when they learned where they would be spending the next few years of their medical training.

Previously, the students had indicated their top three preferences to the National Internship and Residency Program. Appointments are determined nationwide according to a computerized process. Announcements are made simultaneously across the country.

This year 159 MCG students participated in the match program. Ninety percent were placed in one of their top three choices; 65 percent received their first preference. Of the few who were unmatched, all had received alternate positions by the time the announcements were made.

This year about three-quarters of the placements were in major teaching hospitals. The students will be located in 24 states with the majority in the Southeast and about half in Georgia.

MCGRI to distribute $250,000 to support research at MCG

Dr. William F. Davis, vice president and general manager of the MCG Research Institute, Inc. has announced that the MCGRI will distribute $250,000 in June to support research at MCG. Distribution will be based on a pro rata amount, per $1,000 of grant support. Of this amount 45 percent will be returned to the principal investigator, 30 percent to the investigator's department chairman, 12.5 percent to the dean of the sponsoring school and 12.5 percent to the graduate council. This represents an increase of $175,000 over last year's distribution.

Faculty Assembly honors six colleagues

MCG's General Faculty Assembly honored a member from each of the five schools at MCG and the General Programs faculty in their annual awards ceremony.

Those honored included Dr. Bernard Abbott from the General Programs faculty; Wanda Hibbard from the Department of Radiologic Technologies in the School of Allied Health Sciences; Dr. Armand Karow from the Department of Pharmacology in the School of Graduate Studies; Dr. Vickie Lambert from the Department of Nursing Administration in the School of Nursing; Dr. Baldev Singh from the Department of Oral Pathology in the School of Dentistry and Dr. Virginia Zachert from the Department of Obstetrics and Gynecology in the School of Medicine.

Nurses Association names Nurse of the Year

Andree Woosley has been named Nurse of the Year by the 10th District Nurses Association.

Woosley, a nurse educator in ambulatory care services at Talmadge Hospital, has served as second vice president of the association for the past two years.

A 1976 honor graduate of MCG's School of Nursing, she joined the staff of Talmadge Hospital in 1980. She was named an Outstanding Young Woman of America in 1981 and is a member of the American Society for Health Education and Training.

Kanto named chief of Neonatology Section

Dr. William P. Kanto Jr. has been named chief of the Section of Neonatology at MCG.

Also named professor in the Department of Pediatrics, Kanto directs the Neonatal Intensive Care Unit at Talmadge Memorial Hospital.

Kanto came to MCG from Atlanta

where as an associate professor in the Department of Pediatrics at Emory University School of Medicine he served on the staffs of Emory University Hospital, Henrietta Egleston Hospital for Children and Grady Memorial Hospital.

He formerly served as assistant professor in Pediatrics at MCG from 1974 to 1977.

He received his undergraduate and MD degrees from the University of Virginia in Charlottesville, serving his internship at North Carolina Memorial Hospital at Chapel Hill and his residency at the University of Virginia Medical Center.

Ob-gyn chair established by Herman Brooks

Dr. Herman Brooks of Waleska, Ga. has established a John Reese Brooks and Mary Julia Gibson Brooks chair in Obstetrics and Gynecology at MCG. It was approved by the Board of Regents of the University System of Georgia at their May meeting.

The chair was made possible by a trust set up by Brooks to take effect at the time of his and his wife's deaths. It was named in honor of Brook's parents.

For the chair to be established at this time Brooks guaranteed the Medical College an additional $5,000 a year until the trust funds become available.

Brooks is a 1933 graduate of MCG.

Huisman and Fairhurst receive major grants

Dr. Titus H. J. Huisman of the Department of Cell and Molecular Biology received $117,653 from National Institutes of Health for "Inhomogenity of Hemoglobin Types."

Huisman also received $910,143 from National Heart, Lung and Blood Institute for Comprehensive Sickle Cell Center.

Dr. Carl W. Fairhurst of Restorative Dentistry received $136,529 from National Institutes of Health for "Semi — and Non precious Metal-Porcelain Systems."

Barbara Edwards

MCG faculty member named Medical Technologist of the Year

Barbara Edwards, assistant professor in the Department of Medical Technology and an instructor in the Department of Pathology at MCG, received the Medical Technologist of the Year Award during the annual meeting of the Georgia Society for Medical Technology.

Edwards is a member of the Alpha Eta National Allied Health Honor Society. She received her degree in medical technology from the Medical College of Virginia.

Talmadge and MCG celebrate National Hospital Week

Talmadge Hospital joined hospitals across the country in observing National Hospital Week, May 8 through 14. The theme for the observance was "We Treat You Like Family."

Among activities were the second annual co-ed softball tournament, a T-shirt slogan contest, a departmental open house, the annual hospital barbecue, a dunk tank and lunchtime fashion shows.

Nursing school starts program to aid rural hospitals

The MCG School of Nursing has initiated an innovative program with several Georgia hospitals in an effort to eliminate nursing shortages in rural and small town hospitals.

Senior nursing students can now sign up for a course which enables them to work and live in a small hospital setting for two days a week for five weeks. Some hospitals are providing room and board for the students.

Participating facilities include McDuffie County Hospital in Thomson, Jefferson County Hospital in Louisville, Candler County Hospital in Metter, Jenkins County Hospital in Millen and possibly Screven County Hospital in Sylvania.

Beckham to head Project Hope team in Costa Rica

Richard Beckham, Chairman of the Respiratory Therapy Department at MCG, will head Project Costa Rica, an extension of Project Hope.

The goal of the project is to establish a baccalaureate degree program in respiratory therapy at the University of Costa Rica. The program will include a university-based curriculum and an accelerated nurse-training program in respiratory therapy. Another goal of the project is to improve relations with Costa Rica.

The project was formed in response to a request from the Costa Rican government for aid in medical training from our government. Government officials contacted Project Hope, and through them the Medical College of Georgia.

The first class will consist of approximately 20 preselected nurses who wish to pursue their medical training in respiratory therapy, a new field for Costa Rica.

Teaching techniques found to be effective in Costa Rica will be incorporated into future training programs in Egypt to be sponsored by the American Association for Respiratory Therapy.

CAMPUS NEWS

Witham elected president of cardiology association

Dr. A. Calhoun Witham, MCG cardiologist and professor of medicine, has been elected president of the American Association of University Cardiologists.

He will serve a two-year term as president of the organization composed of representatives of the Sections of Cardiology of medical schools in the United States.

A native of Atlanta, he received his undergraduate degree from Emory University and his MD degree from Johns Hopkins University. He has been on the MCG faculty since 1952, serving from 1957 to 1978 as chief of cardiology at Talmadge Memorial Hospital.

Witham also serves as a consultant to the Veterans Administration Medical Center in Augusta, University Hospital, Central State Hospital in Milledgeville, Eisenhower Medical Center at Fort Gordon and the Bureau of Hearings and Appeals of the Department of Health, Education and Welfare.

Former MCG cardiology fellows gathered in Augusta in March for a reunion including a scientific session and banquet. Pictured are (standing from left) Dr. Nancy Flowers, special guest and former head of cardiology at the Veterans Administration Medical Center; Dr. Martin J. Frank, chief of cardiology at MCG; Dr. A. C. Witham, professor and former chief of cardiology at MCG; (seated from left) Dr. Alceo Barrios, a 1958-1960 fellow who arrived from Argentina; and Dr. Gordon Walters, a 1958-59 fellow in private practice now.

Callaway Foundation donates $100,000 to Research Institute

A $100,000 gift from the Callaway Foundation of LaGrange completed the $250,000 campaign for the Medical College of Georgia Research Institute.

Graeme M. Keith, chairman of the steering committee for the MCGRI fund drive and vice chairman of the First Railroad and Banking Company said, "I would like to express my appreciation to the people who gave their time and efforts on behalf of this campaign and to those who contributed to the MCGRI. Approximately $150,000 of our goal was contributed by business and industry in the Augusta area. We are especially appreciative to the board of trustees of the Callaway Foundation for their support of this worthy program. It was their contribution that put us over the top in the campaign."

The completion of the campaign will help ensure MCG's research efforts in the future by making the Research Institute self-sustaining.

MCG School of Dentistry studying sealants

Dr. J. Earl Williams, chairman of the Department of Community Dentistry at MCG is doing extensive research on a transparent barrier to decay called sealants. Sealants are quick and painless to apply, cheaper than a filling, and they last. These decay barriers are put on the biting surfaces of the teeth, prime breeding ground for decay.

Sealants come in a quick-drying liquid that works its way into the grooves and fissures of the teeth.

Children with new, decay-free teeth breaking through are ideal for this protective measure. But a cavity-free biting surface can be protected years later if desired.

Williams said studies are being done that may pave the way for these sealants to be put on top of filled cavities to prevent further problems. Researchers also are looking at whether the sealants will halt the decay process in a tooth which already has decay.

Sealants are not used on all sides of the teeth, only on the biting surfaces such as those found on the molars. The smooth surfaces are protected by flouride, found in toothpaste, water or dental treatments, Williams said.

MCG's School of Dentistry was involved in one of the longest studies of these sealants. Sealants were tested on 382 school children in Richmond County in 1976.

Seven years later, 140 of those students were reexamined and 66 percent of them still had their sealants in place, Williams said. The sealed teeth were virtually decay-free and there was little decay even in those who eventually lost some of their sealants. A marked amount of decay was found in the unprotected teeth.

CAMPUS NEWS

Tedesco receives research award for gastrointestinal endoscopy

Dr. Francis J. Tedesco, professor of medicine and chief of gastroenterology, has received an award for excellence in endoscopic research and for his contributions to gastrointestinal endoscopy.

Tedesco received the Dr. Eddie D. Palmer Endoscopy Award during the 12th William Beaumont Gastrointestinal Symposium in El Paso, Texas.

The symposium is a meeting of uniformed services physicians and provides a forum to exchange ideas and present clinical research reports. It is attended by physicians from a variety of disciplines who have a common interest in diseases of the gastrointestinal tract.

Swift appointed chairman of neurology

Dr. Thomas Swift was appointed chairman of the Department of Neurology at the April meeting of the Board of Regents of the University System of Georgia. He has been acting chairman of the department since January 1982.

He received his MD degree from Cornell University Medical School and came to MCG in 1973.

Swift is a member of the American Academy of Neurology, the American Neurological Association, the Society for Clinical Research and the Society of Clinical Neurologists.

He also serves as director of the Electromyography Laboratory at Talmadge Hospital and is a consultant at several area hospitals.

GWVNH names new administrator

Judith Ann Guthrie has been named administrator of the Georgia War Veterans Nursing Home.

She fills the position left by the retirement of Benjamin R. Snyder Jr. Snyder had served as administrator of the 185-bed nursing home since July, 1970. Guthrie had been serving as Snyder's assistant since September, 1982.

A native of Lanett, Ala., she attended Southern Union State Junior College in Wadley, Ala., and Auburn University. She graduated from Augusta College with a bachelor of arts degree in psychology and received a masters of public administration degree from Georgia Southern College.

She is a member of the American College of Nursing Home Administrators and the American Society of Public Administrators.

The Georgia War Veterans Nursing Home is a facility of the Veterans Service Board of Georgia and is operated by MCG.

Nutritionist named Outstanding Dietitian

Nancy Ann Giles, chief nutritionist at the Children and Youth Clinic at MCG, has been named Outstanding Dietitian of the Year by the Georgia Dietetic Association.

She is treasurer and chairwoman of the long-range planning and finance committee of the Georgia Dietetic Association and the editor and co-author of the Georgia Dietetic Association's Diet Manual. She is also co-editor of the Augusta District Dietetic Association Newsletter.

Giles serves on the executive committee of the Augusta Area Dietetic Internship where she is also a clinic instructor.

Transplant organization installs toll-free number

A toll-free number for information on organ donations 1-800-24DONOR has been established by the North American Transplant Coordinators Organization. Initially it is intended for use by medical professionals who need information concerning potential donor referral. Ultimately, it will be used as a public education tool, with local numbers given to take questions.

"We hope this will mean an increase in organ donations," says Mary Ann House, transplant coordinator at MCG and director of communications for the national association. "It will give physicians and others in the community a contact to help determine if someone can be an organ donor and what procedures must be followed."

The line is manned by transplant coordinators from the University of Pittsburgh.

Caldwell named assistant director of nursing

Jo Ann Caldwell has been named assistant director of nursing for medicine at Talmadge Hospital.

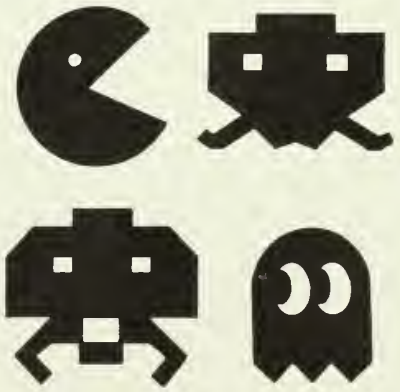
Caldwell, a native of Sylacauga, Ala., has been on the TMH staff since 1962. She had served as evening house supervisor since 1972.

She received her nursing diploma from University Hospital in Birmingham, Ala., and her B.S. degree in nursing from the Medical College of Georgia in 1977. She is a member of Sigma Theta Tau, a national nursing honor society.

Video games needed

Games in Talmadge Hospital's pediatrics units have come of age with the donation of an Atari set for patients. Additional game cartridges are needed according to recreation therapist Anne Comer.

"If anyone has cartridges that perhaps they or their children are tired of we would love to have them," Comer says. She can be contacted at (404) 828-2481.



by Albert W. Pruitt, M.D.

CARING FOR GEORGIA'S CHILDREN:

The primary concern, in 1983, of the Department of Pediatrics in the Medical College of Georgia and of the Pediatric Service in Talmadge Hospital is to meet the current and future health care needs of the children of Georgia. We are pledged to that responsibility and will continue to identify new ways in which we can positively affect the health of infants, children and adolescents in Georgia and the region. In order to have the impact to which we are committed, we must convoke a faculty and develop facilities dedicated to improving the physical and emotional health of the young.

The faculty of the Department is well-recognized for its expertise in patient care and its excellence in teaching. All members are strongly grounded in general pediatrics; subsequently, some faculty members have chosen to pursue a pediatric sub-specialty, others to remain generalists. It is the generalist who cares for and teaches about those patients who have special diagnostic problems or who are at high risk for illness. In addition, the faculty includes physicians with expertise in adolescence, allergy, cardiology, genetics, hematology, immunology, infectious diseases, intensive care, neonatology, neurology, oncology, pharmacology, pulmonology, and rheumatology. Other faculty in the Department have extensive training in biochemistry and sociology; faculty in the Departments of Surgery, Radiology and Psychiatry also have particular interests in child health and disease.

The full-time faculty is the nucleus of the programs in teaching, patient care, and research. Because of the strength of this faculty, patients from most of the counties in Georgia (and many in South Carolina) were referred to us for care during the past year. Children with almost any disorder can be cared for by the pediatricians and pediatric sub-specialists in the Department. In spite of the large number of sub-specialists currently in the Department, however, additional expertise is needed in some areas. For example, pediatric gastroenterology, nutrition and endocrinology are important areas in which we need faculty with special training. The fields of pediatric nephrology and medical genetics are rapidly expanding, and we also need additional staff in these areas to assist with patient care, and to develop teaching and research programs.

In addition to the obligation to provide health care in all the sub-specialties, academic institutions have an obligation to improve health care through research. At this time, a sense of inquiry and curiosity pervades the pediatric faculty; however members of the faculty need time to pursue investigation, since all faculty should be involved in systematic study of clinical problems. The Department considers research such a priority that the faculty earmarks a portion of its earnings generated by patient services for new research projects. Such funds, however are only adequate for short-term projects; we continue to seek, with increasing success, extramural support of the investigation of problems affecting child health.

In addition to the full-time faculty at MCG, we are fortunate to have within the Department an enthusiastic group of local pediatricians who constitute the clinical or volunteer faculty. These physicians are excellent teachers, both in their offices and in the hospital. For many young students, an ongoing interest in pediatrics emerges after they spend time in an Augusta pediatrician's office. Practicing pediatricians in other areas of Georgia participate in a similar manner, and their activities help attract young physicians to many parts of the state.

As students receive training throughout the state, so does the faculty provide continuing education for practicing physicians. Communities such as Adel, Milledgeville and Fitzgerald regularly invite MCG faculty to speak to medical staff and other hospital personnel. In addition, a vigorous program of continuing education courses has been established and sessions in general pediatrics, neonatology and clinical allergy are offered annually.

The Department is also active in sending faculty consultants to the local communities to participate in specialty clinics. It conducts clinics in cardiology,

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neurology, genetics and pulmonology in towns such as Savannah, Waycross and Warner Robins. Satellite clinics for patients with sickle cell disease are being planned. Such clinics bring the pediatric sub-specialists to the patients and reduce the necessity for expensive travel to the medical center. In addition, the faculty consultant contacts the local health care team and establishes ongoing lines of communication. It is our aim that by working with health districts and local health departments, we will expand our interaction with the health care providers throughout the state.

Through our pediatric residency program, we provide pediatricians for the state and the nation. During 1983-84 we have 30 young physicians in our residency/fellowship training program. The majority of these trainees are natives of Georgia and graduates of MCG. Many plan to return to their hometowns to establish practice. We also attract graduates of out-of-state medical schools which further enhances the quality and size of our program.

Continued excellence in health care and training is dependent upon the quality of available facilities. Currently within the Medical College hospital are nursing units for infants and children through age 16. In addition, the Newborn Intensive Care and Intermediate Care Units serve as the tertiary referral center for a large portion of eastern Georgia. During the past few months a similar unit for older infants and children has been established within the hospital. This unit is fully equipped, staffed by highly skilled nursing personnel, and is covered at all times by resident and faculty physicians.

If the Department of Pediatrics is to have greater impact on the health care of children and the education of physicians in the state of Georgia, many of us believe that the next important step is the development of a new pediatric facility. Already the current daily census of Talmadge Hospital includes approximately 100 sick neonates, older infants, children and adolescents. In addition, many children who are private patients of local physicians are hospitalized in other general hospitals within the city. Clearly a population in need of a specialized pediatric facility now exists; as our ability to deliver comprehensive pediatric care grows and the need for more service increases, major space allocation to the care of infants, children and adolescents becomes essential.

Throughout this country and abroad, children's hospitals are institutions of pride. They are institutions that express both concern for children and acceptance of responsibility for their care. Ill children require a dedicated staff and an environment that is designed specifically for their recovery. Furthermore, families of ill children should be provided with support by individuals who are specifically trained to meet their needs.

The establishment of a pediatric health care facility in this area would provide not only for the immediate needs of children and their families, but it would also become the focus for training and research in pediatrics for the state. Along with the training of physicians, health care personnel in fields such as pediatric nursing, physical therapy, social work, and dietetics would also receive instruction and experience in the children's hospital. Clinical research programs would expand as faculty in pediatrics and other clinical specialties increased in number. Even though the facility would be at the forefront of tertiary care, it would also be responsive to the needs of children with less serious illnesses. Balanced education is best offered in an institution that provides various levels of care and accepts patients by referral as well as from local areas.

At the moment, in 1983, planning for such a facility is in a very preliminary phase. The Department of Pediatrics envisions the development of an institution that will incorporate the needs of children and their families, the educational needs of our students, the state-wide need for health care providers, and the nation-wide need for new knowledge. The Department has the will and the commitment to make this vision a reality.■

Dr. Saadeh Jureidini, assisted by Dr. Even Landis, preps a new patient for the cardiac catheter lab.

Intensive care for the tiniest patients

by Sally Simkins

"You do get attached to the babies . . ." "If you know that one probably is going to die you try not to get too close emotionally but you can't help it. I don't know how anyone could not get involved, especially when you're working with them for a long time."

Registered Nurse Michele MacMaster's feelings are typical of those of the staff of the neonatal intensive care unit in the Medical College of Georgia's Talmadge Memorial Hospital.

"The work is emotionally demanding," Mrs. MacMaster continues. "Sometimes, when it gets to the point where it seems that nothing else can be done, our efforts seem fruitless but we keep trying."

The infants in Talmadge Hospital's neonatal intensive care unit, one of five Level III units in Georgia, have a survival rate of 90 percent. They are critically ill when brought into the unit, with prematurity accounting for 75 percent of its admissions. The remainder are full-term babies with congenital defects, such as heart disease, and those born to mothers with chronic illnesses such as diabetes.

The Talmadge unit serves a 23-county area of Georgia but draws from other counties as well because of the pediatric cardiology, pediatric surgery and other subspecialties available here, according to Dr. William P. Kanto Jr., chief of the Section of Neonatology at MCG and director of the NICU.

The average birth weight of infants in the unit is 1,000 grams, or a little more than two pounds. The average gestation age is 33 weeks.

One of the most common problems of the premature infant is RDS — respiratory distress syndrome. The baby's tiny lungs aren't mature enough to produce the chemical needed to help them stay expanded. Instead, they essentially collapse when the baby breathes out.

Its little organs — his kidneys, liver, heart, all of them — are too immature to work as they should on their own.

"In the beginning, when they are just brought in, we are looking at survival, not whether they are going to gain weight," Head Nurse Walter Howell says. "We don't want them to waste any energy at all."

In Talmadge's Level III neonatal unit, all the manpower and equipment to meet the urgent needs for support of the newborn are readily available, increasing its chances of survival.

Dr. Kanto stresses that the neonatal unit is just that — a unit. "Our patients aren't brought to Talmadge to see one doctor," he says. "They are brought for the services and care the unit can provide. The staff works as a team — as a band — and the expertise of each member is vital."

The unit's staff includes, in addition to the neonatologists, interns, residents and nurses, respiratory therapists, blood gas technicians, physical therapists and social workers. The respiratory therapists monitor the infants' breathing, blood gas technicians test their blood gases to make sure their hearts and lungs are working correctly, the physical therapists help develop and strengthen their tiny muscles, and the social workers work with the families and staff.

The ratio of nursing staff to infants is one nurse for every two babies.

"Because of the level of care needed by our babies it would be too much for a nurse to have more than two at a time," Howell says.

"The concept that we are an intensive care unit hasn't gotten across to everyone," Howell believes. "But," he continues, "we are an ICU and have one of the highest acuity rates in the hospital."

While there is stress — both emotional and physical — in caring for critically ill infants there is joy when they are well enough to leave the unit.

"We work with them, we fight right along with them and we become close to their families," Howell says.

Parents and grandparents are encouraged to visit the babies while in the NICU, and especially when the infant is hospitalized for an extended period. Visits and touching — especially touching — are necessary for that bond between parent and child to form.

Sharing in the joy and happiness of the babies' families is special. What's hard is helping the family accept the reality that their baby is not the perfect baby, the "Gerber baby" they had planned on.

"All parents have the 'perfect baby' in mind when they're expecting," Howell says. "When something goes wrong they blame themselves . . . then the blame and anger are shifted to the nurses and doctors."

He said there are hopes to have a parent support group organized to help parents work through their feelings. "I think this would be one of the best things that could happen."

In 1982 Talmadge's NICU averaged 26-30 admissions a month and the length of stay varies according to the infant's size — from just a few days to

three or four months for the smallest ones.

The hospital has a mobile intensive care unit which can be sent to hospitals in the region to transport babies needing the care of the Level III nursery. More and more often, however, efforts are made to have the baby brought into the world at Talmadge when trouble with the baby is anticipated.

"Having the mother brought in and the delivery here is clearly the way to go," Dr. Kanto says. "There's the obvious advantage of having the mother here with the baby, but when you think about it, in utero is the safest way for the baby to travel.

"He's warm and has a good oxygen supply and he's cushioned by his mother's womb rather than being bounced around in an ambulance under an oxygen hood."

A combined obstetric and neonatal approach for premature infants provides the best chance of survival, according to Kanto. The combined intensive perinatal care can provide continuous intrapartum and postpartum intensive care to the fetus and neonate without the associated risks of neonatal transport.

The ready availability of surgical specialties and intensive care also add to the infant's chances of survival.

What's the cost of all this?

It's not uncommon for a bill to be $100,000 or more for an infant requiring longterm care in the NICU.

Is it worth it?

Each year the unit has a "Come Back Baby Party" for the babies who have been cared for there since its opening.

One look at the healthy, happy children and the love in their eyes and in those of their parents is answer enough. ■

(Above) Michele MacMaster takes vital signs. (Below) Neonatal team examines a new arrival.

by Julia Thornton

MCG professor develops GUTS game

The brightly colored game board is simple enough: a path of red and white squares leading to an area called "Freedom." But the actual process of completing the game called GUTS is much more complex and may prevent the juvenile offenders who play it from returning to delinquency.

GUTS, which is an acronym for Growing Up Through Selectivity, was devised by Betty H. Hamm, Ed.D., professor of mental health-psychiatric nursing at MCG, and a colleague of hers to help teach assertiveness skills to adolescents.

It all began a few years ago when Hamm and Dr. Dagmar Brodt, now retired, participated in a simulation workshop. Simulation is a method of teaching which utilizes a created situation to resemble reality. As Hamm explains, "It's like a fire drill. You need to practice what to do before a potentially dangerous situation actually materializes."

After completing the workshop, Hamm decided to apply the simulation techniques to her work with juvenile delinquents at the Youth Development Center in Augusta. The YDC is the temporary home of 15- to 17-year old boys who have had problems with the law. Many of these teenagers' problems, she felt, were a result of their lack of assertiveness skills when faced with stressful situations.

"Most of these kids have difficulty saying no to their peers and yes to authority figures." she says. "Assertiveness training assists them in handling difficult situations requiring a wholehearted yes or no response."

She decided on the game format as a way of reaching the boys because many of them had had trouble with traditional teaching methods. "They don't like lectures," she says, "and many have reading difficulties. They like GUTS because it's fun and relatively easy."

With a roll of the dice, a game of GUTS begins. The player proceeds to either a red (bad luck) or a white (good luck) space and draws the matching card. Each card describes a situation that the adolescent might encounter at some time. It is then up to the player to tell how he might handle this situation.

All the situations described on the cards are actual situations submitted by the boys, and new cards can be written and inserted into the deck at any time. "It's an anonymous way to see how a personal problem would be handled by someone else," Hamm says. Good luck cards are included because positive events can also be difficult for adolescents to handle.

An important rule of the game is that there must be a "referee" present; a professional who has been trained in assertiveness techniques and who can monitor and judge the adolescents' responses. With the help of 6 colleagues, Hamm compiled a booklet of possible responses and their ratings. Each answer is assigned points, and the player either advances, retreats, or remains in the same place on the board according to the rating his response receives. A player must make a minimum of 30 assertive choices to successfully complete the game.

A typical bad luck card might read "You come home from school and find no food in the house." The response "Go out and steal some food" would be rated hostile, and the response "Get on food stamps" would receive a passive rating, while "Call your social worker" or "Ask a neighbor to let you work for a meal" would be considered assertive.

Upon receiving a good luck card that says "You have made a new friend at school," the response "Put your friend down continuously" would be rated hostile, "Ignore your friend" passive, and "Try for another friend" assertive.

One study, published in the July/August, 1982 issue of *Nursing Research*, indicated that GUTS relates to the real world of these juveniles and stimulates group discussion.

Another study indicates that GUTS may also be an important factor in determining whether the juveniles return to delinquency after they return to society. Hamm followed a group of 120 GUTS players for 4 years and compared them with a control group who had never played the game. Each study participant had committed one delinquent act before being sent to the YDC. After one year, 22 percent of the control group had committed another offense, while only 4 percent of the GUTS players had. After two years, the control group's rate of recidivism was 34 percent, while the rate for GUTS players was 12 percent. During the third year, 37 percent of the control group had returned to delinquency compared to 20 percent of the GUTS players, and after four years, the control group's recidivism rate was 40 percent and the game-players' rate was 27 percent.

Although GUTS is presently tailored to adolescent males, Hamm is working on adapting it to females as well. Plans are also underway to create a similar learning tool for overeaters.

"We really think the idea may have potential," she says. ■

Photos by Gretchen Roth

A non-traditional woman advocates traditional views

by Mandy Roth

She lives a quarter block from surburban traffic and a mind apart from contemporary America.

When she moved here with her husband 36 years ago, they had ventured into the countryside; now a driveway and a thickly wooded lot separate their refuge from the sprawling Atlanta metropolis. This 85-year-old pediatrician still treats patients in her Northside home in examination rooms without curtains so the children can watch the squirrels and birds in the trees outside.

Born in 1898, Dr. Leila D. Denmark was the third female graduate of the Medical College of Georgia and the first intern at Henrietta Egleston Hospital for Children in Atlanta. Her research on whooping cough led to the development of present-day pertussis immunizations given to millions of people worldwide.

"I couldn't practice medicine (more than) 50 years without learning something," she says. In 1971 she wrote a book, "Every Child Should Have A Chance," now in its third printing (Heritage Printers, Inc., Charlotte, N. C.). In her book and in life, she has a message she'd like to pass along: today's children are in trouble. They're neglected and malnourished. "The same (kind of) child I used to treat in the slums," she says, "is now brought to me in a Mercedes-Benz." She knows a lot of people won't want to listen to what she has to say, but still she is quick to point the finger of blame: at fault are mothers who don't stay at home with their children. Working mothers can't feed their kids properly or teach them discipline. They place their children in day-care centers — institutions which she says will be the downfall of society.

The verdict seems harsh from one who supported womens' suffrage and believes in equal rights. Women can do anything men can do, but when it comes to bringing up babies, Mom's place is the home. On the topic of child-rearing, she's a nontraditional woman espousing traditional views. Her ideas, she says, are not old-fashioned; they're the salvation of tomorrow's child. Dr. Leila Denmark is a voice from the past with something to say about the future.

This vivacious physician doesn't appear to have walked out of the nineteenth century. Gray hair and etched skin do not an old person make. "I don't know what old age is except when I look in the mirror," she exclaims. "And that messes you up!" Other octogenarians would welcome the reflection from her looking glass: a petite, trim figure that younger women could envy, clothes neatly pressed, collar button fastened, steady hands, sagacious gaze. A chignon captures the flowing stream of gray hair in a whirlpool resting on the nape of her neck. She has more stories to tell than lines on her face, tales recalled in vivid detail. She's agile, she's mobile, she's lickety-split; follow her closely or she'll leave you behind.

"The most important job on this earth is to make a human being," she says. That job begins long before the baby arrives. Parents undo a healthy start for their child through dissipation, she says. Dissipation means to scatter or disperse. To indulge in intemperate drinking. To Denmark, it means anything on earth that destroys a child's chance and opportunity in life. It's coffee and smoking. It's drinking and drugs. It's the devil at work.

A baby is the union of a sperm and an egg, she explains, and the bodies these come from must be pure. "Man is supposed to be the wisest of all creatures, she writes, "yet we see a pregnant woman drinking alcoholic beverages, smoking or dipping tobacco, taking drugs that she would never think of giving to her child; but she is making her unborn baby take these things for nine months. Then she expects her baby to come into the world as happy, docile and cuddly as a little kitten."

These babies are anything but docile, she warns. They are born addicts; slaves to their mother's habits. Birth for them, forces withdrawal. Besides the medical problems this causes, these infants cry constantly and won't eat properly. "When we study the animal kingdom, the cat, dog, cow, horse, we never see their little ones go through all this torture . . . the mother cow would not eat or drink anything that would hurt her calf."

Yet time and time again, she says, parents come to her unwilling to accept the responsibility for what they've done to their children. She tells a story about the parents of three children. "There's something wrong with all three," said the father, "and I want you to see if you can straighten them out."

"The mother looked about as bad as a woman could look and the father even worse," says Denmark. "The mother's skin was brown and 'cobblestoned' in appearance and her breath was so bad from tobacco, you had to hold your breath to talk to her. Her teeth were so brown from tobacco stain that as she smiled, her mouth looked like a dark hole. The father looked the same. I thought to myself, 'If I had a stallion that looked like that man

and a mare that looked like that mother, I would not expect a Kentucky race horse out of their colt.' Breeding animals or plants is no different from breeding people. We can't expect more in a baby than in the mama and papa who make him!

"After many years in the practice of medicine," she says, "I have seen a great change in the problems that come to doctors. The tears that were shed for little children forty or fifty years ago were brought on principally by the ravages of disease-causing organisms that killed or left the children handicapped. Medical science has made great progress in conquering and reducing disease but the mothers still come with their tears. Now they are shed over the child who is a product of dissipation, born to parents who did not care enough to give the child the best prenatal start and then the best possible environment that would make for as perfect a life as possible."

Her parents, Elerbee and Alice Daughtry, gave their daughter, Leila, a good start in life, she says. She was one of 12 children growing up on a farm in Portal, Ga., a town near Statesboro which her grandfather is credited with founding. "My father was the head of the household, but my mother was the neck," she recalls. "And the neck was the thing that turned the head . . .

Women had a tremendous influence in the home, and although they were not heard in public, they were the secret influence that made or destroyed the home."

When Denmark was 10 years old, something happened which had a tremendous impact on her life. A "tent show" came to town to put on a one-night production. After the show was over, "the stage was cleared, the lanterns were turned up and out came a tall, pompous lady dressed in a black silk, voile skirt over a taffeta petticoat, a white blouse with a high collar, watch on one shoulder, and glasses on the other . . . She was the most important looking lady I had ever seen." The woman spoke to the audience and made a plea for women's suffrage. Denmark remembers the woman saying that if women got the right to vote, they would do away with tobacco, alcohol and bad politics. "As a child, these statements sounded good to me," she says. "If women like my mother could run the country, it would be a great country."

Her book details further: "Women should be free to vote, for women were and always have been the force behind the men. They have made and trained every man on earth except Adam. As women think and conduct their lives, so goes the country, whether the women have freedom to vote or not. It would be impossible for a country to fail if every woman in that country did a perfect job in the making and training of boys and girls . . .

"Woman (sic) suffrage sounded like a good idea. Some men and women were afraid of the idea and there was a great fight. One of the strongest arguments against it was that a woman's place was in the home. There must be a foundation for any nation, and woman has always been that. If she left the home, the foundation would crumble and the country would go down. Another argument was that a home without a mother is not a home. We must not kill the goose that lays the golden eggs. When the trainer quits, we lose the race.

"Yet in spite of all these arguments, women did win the right to vote which was proper, since women should have the right to vote and be free to do the things they want to on a equal basis with men. But with all these rights, woman must still be a woman and live the life of a woman and be the maker of men; for there is no other way on earth to make men. With freedom must come knowledge and wisdom and woman must know that freedom does not make her a man, that her body is the only source of man, and that man cannot be better than the material of which he is made. Woman was made by God as an instrument to produce man and she is the only source. Through her every man has had to come blessed or cursed by her will to do good or evil in the making of that little body and in teaching him a way of life.

"That suffragette was fighting a battle she was sure to win, but I wonder what she would now think her victory has meant in true value to little children."

Little children. Denmark has devoted a lifetime to them, although she didn't always plan it that way. Back on the farm where she grew up with 11 siblings, she spent her time doctoring animals. Doctoring people was not on her mind. "I thought I was going to be a millner," she says. After learning to sew, she decided to be a seamstress, then, in boarding school she wanted to be a dietician. When she entered Tift College in Forsyth, Ga., a doctor there allowed her to work in his dissecting laboratory. It was there she became interested in medicine. She got a taste for it. It got into her blood.

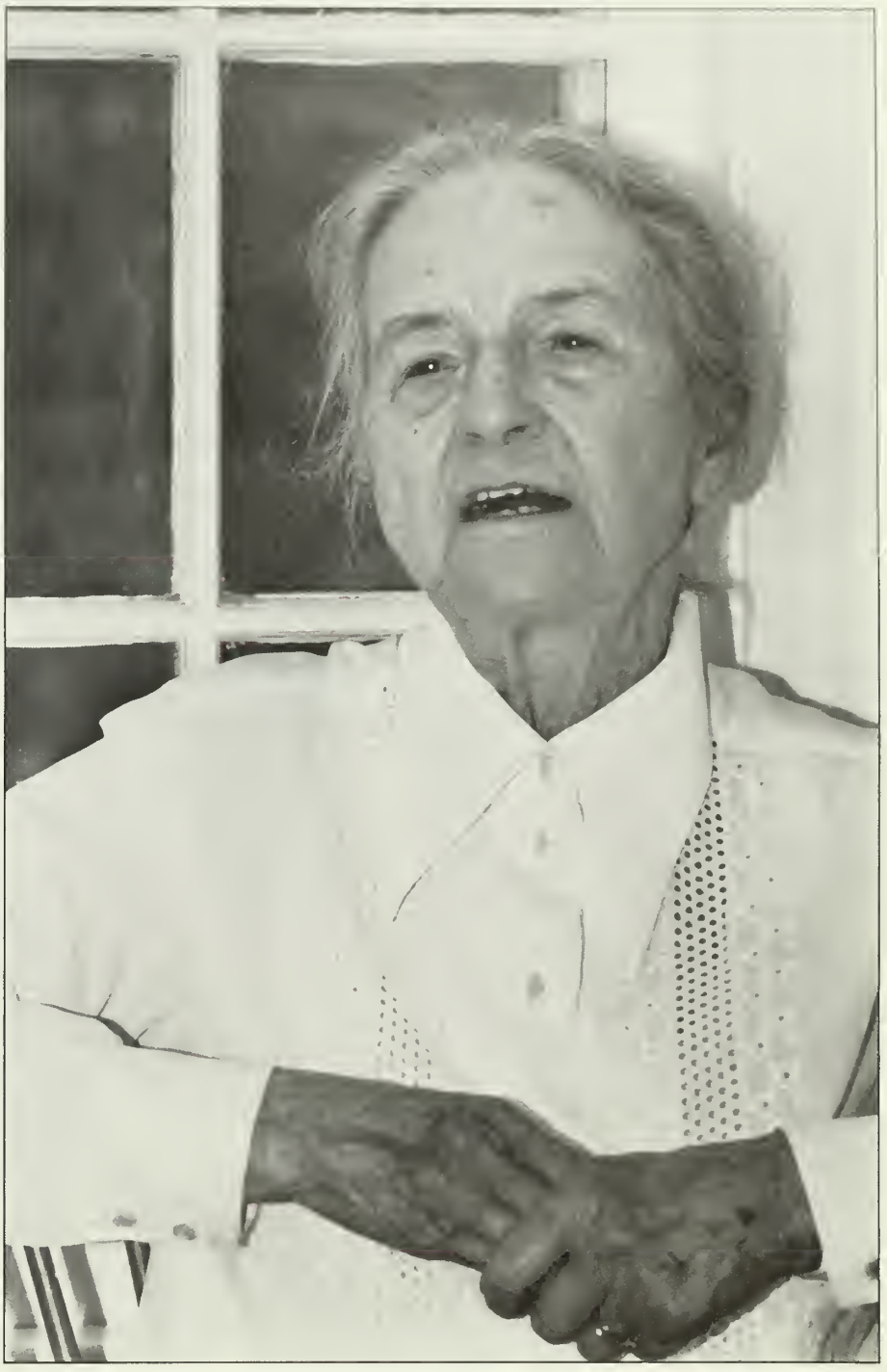
She taught school for two years before a marriage proposal almost brought an end to an unfulfilled career. John E. Denmark, a long-time companion, expressed his intentions, and shortly after was named a consulate to Java for two years. "He couldn't take a wife," she says, so she boned up on her chemistry and physics and applied for admission to MCG. She had to talk her way in. "They told me to wait until next year," she remembers. "I said, 'I'm getting older, I don't want to wait.' The next morning they told me I could enter medical school." Her family and friends thought this move was "terribly nontraditional. You go to that place and you'll lose your 'feminality,' " they said.

Two days after graduation, she

married John Denmark who had since returned from Java. They moved to Atlanta the same day. The next few years were spent establishing their careers; her husband eventually became vice president of the Federal Reserve Bank in Atlanta. During her internship at Egleston and charity work at Central Presbyterian Church Baby Clinic, she began developing her philosophies about raising children.

Sometimes these philosophies stem back to the farm. "Many times when I meet parents who are in tears with their first baby, I say to them, 'You see that little squirrel out there in that tree? She has her babies and she has never read a book or been to a doctor — yet she knows just what to do for them. If you just settle down and think for yourselves, you will find that these problems are not half as big as they seem. All that little squirrel does for her babies is to feed them, keep them clean, warm or cool, and away from people. Maybe it is not quite that simple, but it is not half as complicated as the books, neighbors, grandparents and doctors would make you think it is."

Her advice ranges from the philosophical to the practical. Should a baby sleep on its stomach or back? "All the talk about how a baby should sleep has been by good medical men and which is (the mother) to follow? She can follow but one, so she should go to the lower animals again and see what the cat, the squirrel, the cow, the horse do with their young; for them there is no trouble deciding how to place their babies. There is no animal on earth dumb enough to place newborns on their backs except man. This little baby has been held tight for nine months and when he is placed on his back, his hands and feet go free and he feels like he is falling . . . On his back he reacts like a bug on its back."



Her ideas, by the way, are not solely based on her experiences with other people's children. In 1930 her first and only child, Mary Alice, was born. Then, besides having a new baby, she had a problem. What was to become of her medical practice? "My child had to be first," she insisted. She found a way to combine the best of both worlds. She opened a pediatrics practice in her home, using the breakfast room as her office. Today her offices are located in an annex to her home, built across the carport. Patients come without appointments and while they wait, the children can play on the "mountain" in the forest behind her home. But when Mary was young, Denmark thought the trek across the carport was too far from her child. So the patients were examined in the breakfast nook, an arrangement which worked out well for her practice and her child. Admittedly, she had an advantage not available to most working mothers today: live-in servants. Washing, ironing, cooking and cleaning were someone else's chores. "I wouldn't get a servant

to do all that today," she concedes. "I wouldn't practice medicine if I had a child today. If I practiced medicine, I would leave off childbearing."

That subject brings the pediatrician to her cause célebre. "If I was running this country, I would pay women to stay home and look after their children," she says. "I don't want anyone to be thinking I don't want women to work; I'm all for women to do anything on earth." But having a child changes things. "A woman should never bring a child into this world and neglect that child for somebody else's child or husband." Then she strikes a note that would send many working mothers in a rage. "These women really don't have to work. They could run their lives on a (smaller scale)." The additional money the working mother brings home is cancelled out by the cost of clothes, transportation, nursery bills and doctor bills ("and make sure you put 'doctor bills' in there, she instructs.).

Denmark views nurseries as germ factories. "This is a real sad story," she says. The children get sick and they're brought to her office.

"Is your baby in a nursery?" she asks the parents.

When they answer "yes," she replies. "No pediatrician on earth could keep your baby well. In 72 hours they'll be sick again." Nurseries are guilty of more than spreading infectious diseases, she says. They let children nap and snack throughout the day; two out-and-out crimes in the Denmark book of childcare and habits that can lead to malnutrition. The biggest fault she finds with day-care centers, though, is the lack of attention a child receives. No one supervises their growth and discipline. "It's more important to have a good system of training for your child than it is to run the Federal Reserve Bank. Nothing works without a system," she says. Mothers who stay at home are often just as guilty of neglecting their child's needs.

"This is the way the story goes very often in my office. Mrs. Smith brings in Martha, age three." The child is thin, pale and listless. She cries easily and won't eat properly; obvious signs of malnourishment are present. After questioning, Denmark discovers that the mother lets the child sleep late and eat only what she wants. This usually amounts to cookies and milk as snacks. The child naps often during the day.

"I say to the mother, 'This is a matter to worry about!' Try this routine for three months. She is to get up in the morning when you and your husband

get up. You should prepare a good country breakfast of meat or eggs; grits, farina, oatmeal or corn meal mush; hot cakes or bread; raw fruit and cooked fruit; water to drink. This meal is to be at 7 o'clock. The meal should be served with all members of the family at the table at the same time. There should be a blessing." She details the child's entire schedule. No snacks. No naps. Prepare good food. "Give this a trial. You and your little girl try living together and let her help you and you be ready to help her with her projects and problems. Teach her to sew and help you bake, read to her after lunch, teach her how to create her amusements and to make her dolls and doll dresses and you will be a happy mother and she will find out the most important thing in a child's life — that she has been born with a good guide."

Children need a good guide, she says, something working mothers are unable to provide because they suffer from guilt. "No woman can work eight hours at a job then work eight more hours at home and do a good job." She illustrates her point with a story about an "important" business woman in Atlanta; a mother with a problem child.

"That baby is one year old, 15 pounds and still nursing," says Denmark. (She recommends weaning infants at exactly seven months). "She nurses the baby all night." The child cries constantly.

"I give him quality attention," says the mother.

"Quality attention?" says Denmark. "You know what that means? She puts everything down when she gets home and gets down on the floor with him for a while. She carries him on her hip while cooking. She can't be lugging him all day, but she can't afford to (put him down) because she's got a guilt complex. Children have to learn that they can't get everything (they) want in life."

"A child will crack his head against the floor to get attention," says Denmark. "He's afflicting his body to get what he wants." A mother who has time to discipline her child will learn to ignore the child and he'll stop; she says. The mother with the guilt complex will rush over and pick up the child every time he starts. "When he's 16 and can't get the girl he wants, he shoots himself." He's still afflicting his body to get what he wants. "Children learn self-discipline from the day they are born."

It could be argued that mothers don't have to be the main force behind the child's discipline. In some families, the mother works and the father stays at home to raise the kids. Denmark doesn't approve. "It just doesn't work," she says. "I don't think any father is capable of being a mother. It's just not the same. (There's) something about a mother that's different from a (father)." Having a husband staying at home causes the wife to lose respect for him and destroys the "masculine image" in the home, she says.

What alternatives does the pediatrician have then, for single mothers and mothers who choose to work? "There should be a grandmother," she says. Another solution is to leave the child with a mother that doesn't work. "That child still gets mothering," she says.

Her husband says he agrees with her theories on child-rearing. He is now retired from his position as vice president of the Federal Reserve Bank in Atlanta. Their daughter, Mary, evidently feels that Mom knows best: she formerly worked on the women's page at one of the Atlanta papers; she stopped working to stay at home and raise her two children.

Raising children is a long-term commitment, Denmark says, but when they approach adolescence, they begin to make their own decisions. After this, the lessons you taught them while growing up will hopefully pay off. But an adolescent who chooses to do wrong is not necesarily a reflection of bad parenting. "They're old enough to know right from wrong and I don't believe in 'peer pressure.' We have really overworked that thing." Children choose to do something wrong because they *want* to, not because they have to, she points out. They're capable of establishing their own priorities.

The priorities of real concern to Denmark, though, are the one's today's women have set for themselves. She pulls out an issue of *Atlanta Weekly* magazine. On the cover is a picture of a

nice-looking woman. She is well-dressed, executive style, and is speaking into a telephone. She stands with one hand resting on a baby's cradle. But there's no baby inside. Occupying the space where the infant should lie is the slyline of Atlanta, a construction site: corporate America.

"I couldn't get to sleep the night after I saw that," she says with a look of concern. "That picture is really America today. You know what they say, 'the hand that rocks the cradle rules the world.' Now we're going to rock the commercial cradle. Now that's a gorgeous woman," says Denmark, tapping the magazine cover with her fingertips. "But someone had to make that woman. This woman has got to be made by a great mother."

Referring to the woman who spoke for women's suffrage in the tent that night 75 years ago, Denmark writes in her book, "I wonder what our suffragette friend would say if she would come back today and see just what we women have done with our emancipation. Women should never have been deprived of a human right, but with freedom comes responsibility. No woman, no race, no country should be free until they are able to use freedom to better themselves and mankind. We will not turn a child out of our homes until he is able to make his own way in

the world and to use his freedom from parental domination intelligently enough to establish a home and a life of his own. Freedom is a dangerous thing if the free person has no feeling or thought of his fellow man."

Denmark says that with the right to vote, women have not done what the suffragette had vowed they would: to do away with tobacco, alcohol and bad politics. "Women got the vote, but right today there's more women alcoholics than men, women smoke more cigarettes than men, they help pass laws to kill our own babies and tried to pass laws to get 24-hour-a-day nurseries."

"In history there has been one thing that always comes true. The army of occupation, if it stays long enough, is absorbed by the people it has conquered. I wonder if that is not true in this case. The great evils we were going to destroy and force out of the greatest nation on earth have played a reverse game and have not only continued to destroy men by the thousands but have engulfed the only hope of a nation, the greatest of all fighters, the woman. Has our emancipation brought man up to a higher level of living and better health, or has woman lowered her standards and lost all she has been fighting for? Has the emancipation of women really made a happier world for little children?

"I can't help but think that perhaps freedom for women has been a little too much for us and that maybe after women have shown men that they can do everything a man can do, we will come to ourselves and realize that the only way for this country of ours to go up instead of down will be for every woman in America to take her freedom and make of herself a true example of what she wants her child to be." ■

Denmark's work in developing pertussis vaccine

A product of Dr. Leila Denmark's ingenuity is coursing through millions of bodies around the world.

In the 1930s, Denmark's research on whooping cough was instrumental in developing the present-day pertussis vaccination. Now combined with innoculations for diptheria and tetanus and known as the DPT vaccination, it has saved countless lives.

Her research began in 1933 when "we had a terrific epidemic of whooping cough." At Central Presbyterian Church Baby Clinic she was treating 75 children afflicted with the disease. She developed a serum from the blood of a man who was suffering from pertussis also. The serum was injected into some of the sickest children and they began recovering immediately. "Then I realized I could immunize people," she says.

About that time she read a "four-line article" in the American Medical Association Journal about a pertussis vaccination a Dr. Louis Sour had used and "felt he was able to immunize an occasional child," she says. "I wrote Eli Lilly & Cutter (Pharmaceutical Company) and asked them to make me a vaccine similar to Sour's."

Working in conjunction with Elizabeth Gambrell at Emory University, she injected healthy children with the innoculation and drew blood for testing one month later. Only 25 percent of the children showed immunity, she says. "I asked Eli Lilly to double the concentration."

This time, 50 percent of the children showed immunity. Once again she asked the pharmaceutical company to double the concentration and finally, testing showed that 98 percent of the children receiving the vaccination were immune.

Today, the pertussis innoculation, in combination with vaccinations for diptheria and tetanus is considered a standard childhood innoculation. In many states, immunization is required for entrance to school.

Although she contributed to the development of this life-saving innoculation, "I don't want any recognition," she says. "That's embarrassing. If it hadn't been for Central Clinic, I couldn't have done the work." ■

A president says goodbye

by Michael Lewis

His last day, June 30, 1983, was rather routine — almost normal.

After several weeks of dinners, receptions, plaques, thank-you's and farewells, Dr. William H. Moretz's last day as president of MCG passed quietly.

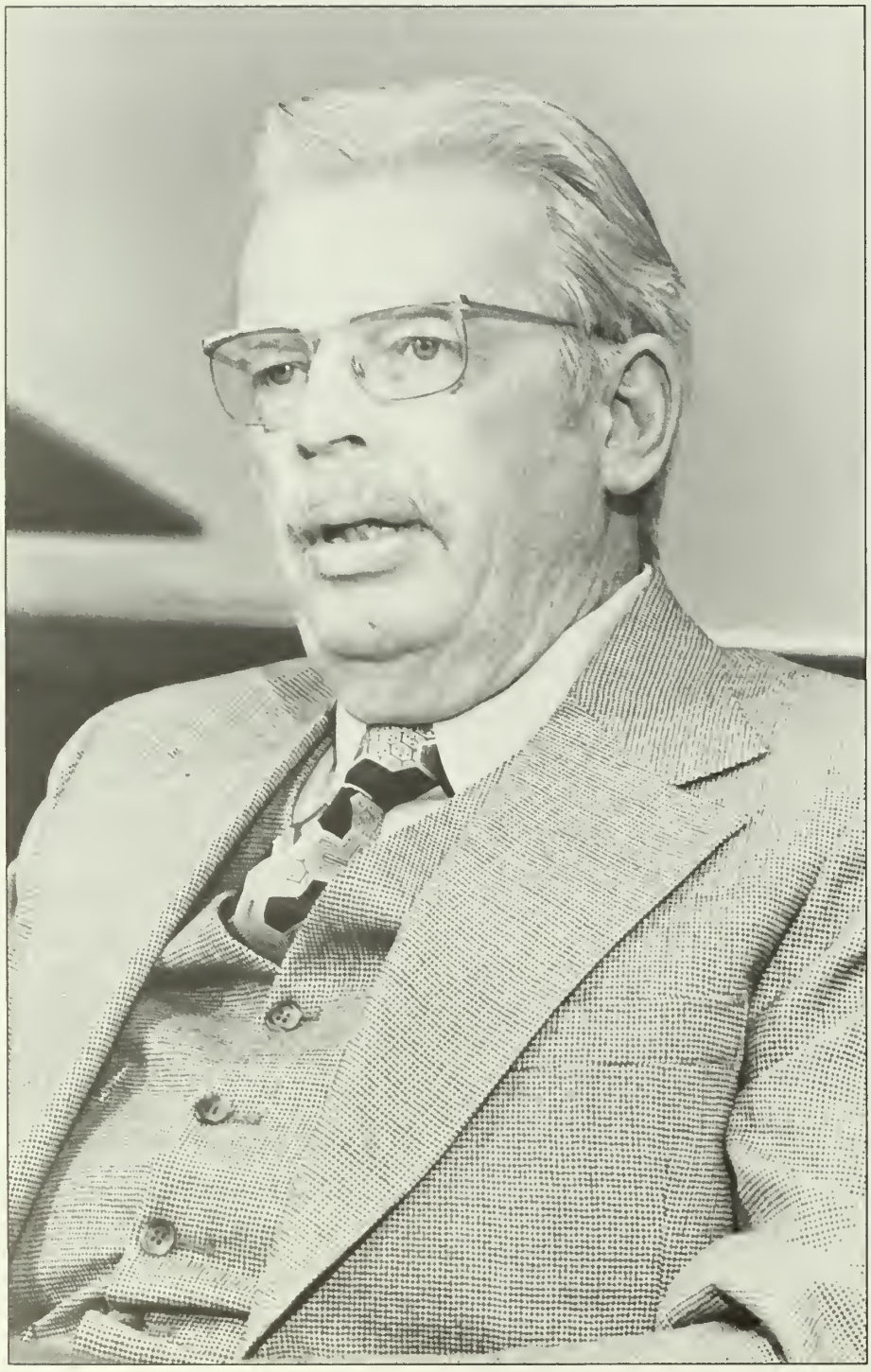
There were a few meetings, some papers to sign, some colleagues dropping by to say good-bye and a conference with now-interim president, Dr. Harry O'Rear.

Dr. Moretz paid a visit to the retirement reception for Barbara Harms and Dr. William Harms. He seemed to enjoy visiting with friends and associates while someone else was the center of attention.

After the reception Dr. Moretz returned to the third floor of the administration building. His last duty as president was reading and signing some papers left by his administrative assistant, Erie Blissit.

He gathered his possessions from his empty office and left without any tears or farewells.

There were no tears or farewells because everyone else had gone home for the day. It was 6:20 p.m. He had worked overtime. ■



Famous MCG research scientist dies

by Julia Thornton

Dr. Raymond P. Ahlquist, 68, Charbonnier Professor and professor of pharmacology at MCG, died on April 15, 1983, ending a 43-year research career which will continue to have tremendous impact on the medical world.

Ahlquist's theory of alpha and beta receptors was a new and revolutionary concept that laid the groundwork for the development of important beta-blocking drugs. One of these drugs, propranolol (Inderal), is used worldwide and has been called a "potential panacea for modern man's ills."

Recruited to MCG in 1944 to expand its two-man pharmacology department, Ahlquist began studying how the autonomic receptors in the uterus and cardiovascular system work. He then made an interesting discovery: that certain observed responses to drugs could not be explained in conventional ways. In 1948, when the accepted theory focused primarily on the importance of hormone mediators, Ahlquist theorized that specialized receptors existed. These receptors, which he termed "alpha" and "beta," must react to the hormonal messages initiated by the sympathetic nervous system. He then postulated that the predominant receptors of adrenaline and adrenaline-like substances in the heart are of the beta type, affecting its contraction, its rate and its rhythm or pacing; and that the alpha receptors are widely distributed in the body, but appear chiefly in certain blood vessels.

These discoveries were to eventually lead to a new treatment for cardiovascular diseases, but when Ahlquist initially tried to make his theory known, he was, for the most part, ignored; the alpha and beta theory differed too greatly from the commonly-held theory of the time.

More than a decade went by before the alpha and beta receptor theory was viewed with great interest, not in

the U.S., but in Great Britain. Dr. James W. Black, after reading about Ahlquist's theory in scientific journals, decided to use this information in his own search for a drug that would reduce angina pectoris and help the diseased heart function less stressfully. Propranolol, the result of his 6-year search, acts as a blocker of the beta receptors because of a mechanism which allows it to actually occupy the receptors, thus preventing adrenaline and adrenaline-type substances from attaching themselves to these receptors.

As Dr. Ahlquist explained, one might visualize the beta blockers as a dog in a cow meadow. The dog doesn't eat the grass, but disturbs the cow by barking, the cow stops eating the grass and as a result, the meadow remains green.

Because of this beta-blocking effect, the heart is not compelled to pump as hard nor as fast as it would have had to do otherwise, and the symptoms and pain of cardiovascular disease are lessened.

Propranolol now outsells antibiotics and tranquilizers in Europe and is used in the treatment of hypertension, chronic alcoholism, schizophrenia and anxiety as well as heart disease. Its use in the U.S. is more limited, but with future Food and Drug Administration approval, it could be as widely used as in the rest of the world.

For their work in developing propranolol, Drs. Ahlquist and Black received the 1976 Albert Lasker Award for Clinical Medical Research. The judges of this prestigious award termed propranolol "one of the most important drugs of the century."

The same year, Ahlquist also received the national CIBA Award for Hypertension Research.

Closer to home, Ahlquist was an important member of the MCG faculty. Serving, at various times, as professor and chairman of the Department of Pharmacology, associate dean of the School of Medicine, and research coordinator, Ahlquist established the pharmacy at Talmadge Memorial Hospital and brought closed circuit television teaching to MCG classrooms.

In 1977 he was chosen as MCG's third Charbonnier Professor, and for the years 1976-77 and 1981-82 he received the Medical College's Outstanding Faculty Award.

Tips on making your will

by Bruce Howerton

When a person dies without a prepared will, the state of residence furnishes a substitute will which distributes the decedent's assets in accordance with state laws. The formula will seldom make the distribution of property in accordance with the decedent's intention or take into consideration the unique circumstances of various heirs. Less deserving persons may be included at the expense of an intended beneficiary. Tax saving opportunities will be sacrificed and the administrative procedures of probating intestacy (dying without a valid will) can be cumbersome and expensive to the estate.

The ability to distribute your assets so as to continue the commitment you are now making to loved ones, your interests, and your causes is perhaps the most important aspect in creating a valid will. A will can be a very powerful instrument and therefore deserves much careful attention in your preparation and careful drafting by a knowledgeable attorney. You need to develop a list of all assets that make up your estate, those beneficiaries you intend to include, and a method for determining the equitable portion to each beneficiary before your visit with counsel. In any event, your lawyer will be more than happy to discuss the specifics of your desires in your will.

Each year, more and more individuals are naming educational institutions in their wills. No doubt, these bequests have greatly enhanced the quality of educational standards, expanded the research capabilities, and continued academic programs which would otherwise have ceased to exist. The Medical College of Georgia wills are providing current funds for endowed professorships, visiting lecturers, support of research activities, purchases of new equipment, and scholarship programs for students in our various schools. Gifts by will have become an integral part of financing educational institutions because they enable a donor to make a more significant contribution than might have been possible during life.

Besides the philanthropic motives of a gift by will, the Internal Revenue Code allows a Charitable Estate deduction for every dollar left to non-profit educational institutions. Therefore tax savings could be one result of including the Medical College of Georgia in your will. Charitable Trusts created in your will are growing more popular. These devices often provide a lifetime income to a spouse, child, or other loved ones with the remainder of the trust passing to the institution after a period of time.

Most importantly, you need to act to make sure your intentions for distributing your property at death are carefully planned and in your will. If you wish to receive more information concerning the Preparation of Your Will please contact your attorney, CPA, CLU, or other financial advisor. If we can be of any further assistance in showing you ways of benefiting Health Education, Research, and Care through the Medical College of Georgia, please call our staff at 404/828-2121. ■

ALUMNI NEWS

Cited for "a life of distinction, eminence, and excellence", Dr. Julian K. Quattlebaum, Sr. of Savannah was awarded the first Distinguished Alumnus Award given by the MCG School of Medicine Alumni Association. Presenting the award were Dr. Robert A. Matthew, (right) President of the School of Medicine Alumni Association, Dr. LaMar S. McGinnis Jr., Past President, (left), and Dr. Fairfield Goodale, Dean of the MCG School of Medicine.

Quattlebaum receives first Distinguished Alumnus Award

The first Distinguished Alumnus Award from the MCG School of Medicine Alumni Association was presented to Dr. Julian K. Quattlebaum, Sr. of Savannah. The award was given on April 15, 1983, at Spring Honors Day on the MCG campus.

Dr. Quattlebaum, a 1921 graduate, was cited for "a life of distinction, eminence, and excellence."

A native of Statesboro, Georgia, Dr. Quattlebaum graduated with honors from the University of Georgia, where he lettered in baseball. He led his classes in Augusta for four years, and is president of his class. He helped defray his medical school expenses by playing semi-pro baseball each summer.

Following his graduation in 1921, Dr. Quattlebaum went to Savannah, where he became the first physician to limit his practice to surgery. He helped organize the Georgia chapter of the American College of Surgeons and served as its president. He was also a founding member of the Southeastern Surgical Congress and helped organize the Georgia Surgical Society.

In 1952 Dr. Quattlebaum gave one of his most significant and widely recognized papers, "Massive Resection of the Liver." This established him as the first to report right hepatic lobectomy (actual trisementectomy) for primary carcinoma of the liver. This and many related papers which followed made him one of the pioneers in the field of liver surgery. The Medical Association of Georgia recognized this leadership in 1981 when they presented him the Hardeman Award.

He has served as president of the MCG School of Medicine Alumni Association, and as president of the University of Georgia Alumni Society.

ALUMNI NEWS

Physician's Physician Awards

Twelve graduates of the MCG School of Medicine were named Physician's Physicians by their fellow alumni during the 1982-83 year. The awards given in connection with regional alumni dinners. Recipients were as follows:

Dr. Albert M. Deal, '39, Swainsboro/Statesboro area, Oct. 21, 1982

Dr. E. Wayne Culbreth, '50, Rome area, Oct. 27, 1982.

Dr. LaMar S. McGinnis, Jr., '54, Atlanta area, Oct. 31, 1982

Dr. DuBose Egleston, Jr., '38, Columbia, S.C. area, Nov. 4, 1982

Dr. J. Zeb McDaniel, '32, Albany/Thomasville area, Nov. 18, 1982

Dr. Daniel B. Sullivan, '49, Augusta/North Augusta area, Dec. 9, 1982

Dr. A. Wade Strickland, '64, Waycross/Brunswick area, Feb. 3, 1983

Dr. Raleigh W. Rollins, '69, Tallahassee, FL area, Feb. 16, 1983

Dr. Curtis M. Phillips, '43B, General Florida area, 17 Feb. 1983

Dr. Floyd C. Jarrell, Jr., '46, Columbus/Manchester area, Mar. 2, 1983

Dr. Milford B. Hatcher, '35, Macon area, Mar. 3, 1983

Dr. H. Alan Perry, '69, Birmingham, AL area, Mar. 30, 1983

The 1983-84 regional dinners will mark the second year of this award, but the first opportunity for some regions to select a Physician's Physician Award recipient, since some regions meet only every other year.

School of Medicine Alumni Association Awards Grants

For the first time, the MCG School of Medicine Alumni Association has awarded scholarship grants. This was made possible by increased alumni dues payments. Given primarily on a "need" basis, four awards of $1,000 each were announced at the Spring Honors Day on April 15, 1983. These recipients were selected from 11 applicants. The selection was handled by a special Alumni Association committee headed by Dr. Lois T. Ellison, working in conjunction with the MCG Student Financial Aid Office.

The recipients were:

Harry L. "Bo" Cheeves, III, '85, for Spring 1982

John M. Dent, III, '86, for Autumn 1983

James Whiteside Keith, '86, for Autumn 1983

James C. Sherman, '86, for Autumn 1983

Additional awards will be announced on future Spring Honors Days, depending on the availability of funds, and the approval of the Board of Directors of the Association.

Alumni Directory

For the first time in MCG history, a comprehensive five-school alumni directory is being prepared. This fully researched publication will be a valuable reference volume for alumni who wish to know where their friends and fellow professionals are and what they are doing now.

The MCG Foundation has selected the Bernard C. Harris Publishing Company, Inc., of White Plains, New York, to compile, publish and market the directory, financing the operation through the sale of individual directory copies to alumni only. This was done after a thorough review of this firm's extensive experience and success, and a review of other firms in the field.

While MCG will derive substantial benefit from the completely updated records and other valuable information obtained, the institution and the MCG Foundation will not benefit financially from directory sales (purchases should not be considered as a contribution).

The main body of the directory will consist of an alphabetical listing of all alumni. This will be followed by individual class listings for each school, and then a listing of alumni by specialty. The last part of the directory will be arranged geographically with alumni indexed by city, state and foreign nations.

All directory information will be compiled and researched by Harris Publishing prior to publication. Brief questionnaires will be mailed to alumni between November of this year and January, 1984. This will be followed by a telephone verification early next summer. Alumni cooperation in providing the latest information will help ensure that this is a fascinating, useful and comprehensive directory.

Each alumnus of MCG will be given the opportunity to order a directory at the time when their information is verified by telephone. Only enough directories to fill these pre-publication orders will be printed. Circulation will be limited to MCG alumni only.

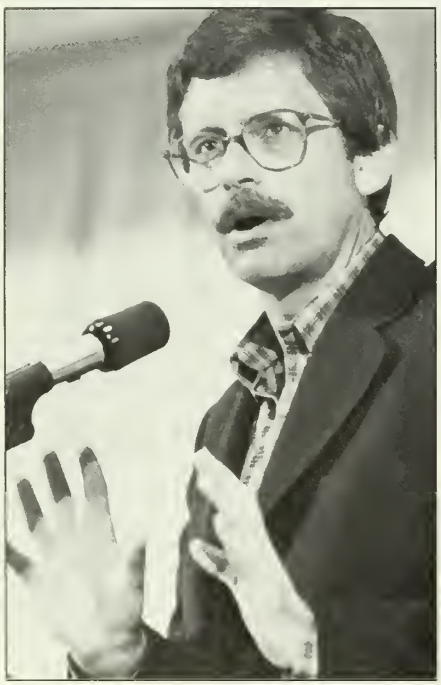
The directory is scheduled for release in early Autumn, 1984. Further information will be sent to all alumni as it becomes available.

Have you got news for us?

Let us know what's happening in your life. Be sure to include your name, address, degree and year of graduation from MCG. Mail to:

MCG Alumni Office, EA-100,
Augusta, Ga. 30912.

HOMECOMING 1983



CLASS NOTES

SCHOOL OF ALLIED HEALTH SCIENCES

Associated Dental Sciences

Gail Goldstein Heyman, '75, Rome, works part-time for MCG graduates Drs. **Larry Stephens,** '73, and **Mike Webster,** '74. She is also active in the Junior Service League, Garden Club, and other community organizations.

Peyton T. Heidel, '79, resides in Greer, SC.

Laura Lea Betts Dills, '80, Cherry Log, married David A. Dills, August 22, 1981. She works with **John Walton,** DMD, '80, in Blue Ridge.

Medical Record Administration

Launa Graham, '73, Atlanta, is Health Planner for VA Medical District #9.

Donna White Kearney, '76, Newport News, VA, is associate director of medical records at Norfolk General Hospital. Her husband is serving in the PRECOM Unit of the USS Carl Vinson.

Ellen Wallace, '76, Augusta, is Health Systems Specialist at VAMC.

Margie Haslam, '78, Gainesville, FL, is director of medical records at North Florida Evaluation and Treatment Center. She is also president of her regional organization, the Sunshine Medical Record Association.

Lynn Carver Thomas, '78, is editor of "Communique," the Georgia Medical Record Association newsletter.

Beth Williams, '78, Richlands, VA, is assistant director of medical records at Clinch Valley Community Hospital.

Jean Webb, '80, Thomasville, is assistant director of medical records at Archbold Memorial Hospital.

Medical Technology

Christy Bell Smith, '82, Atlanta, is employed at Northside Hospital. She has one son, Phillip Jerome, born December 20, 1982.

Occupational Therapy

Lynn Martin, '80, Augusta, is employed with the Richmond County School System.

Physician's Assistant

Cathy Espy, '79, San Bernardino, CA, and her husband are on the staff of Campus Crusade for Christ, International. She is working in the area of health coordination and plans to do overseas medical mission work.

Radiologic Technology

Michael J. Grieco, '73, Hershey, PA, is the administrative nuclear technical trainer, radiologic controls, at Three Mile Island Nuclear Power Plant. He and his wife, Claudia, have three children: Frederick, 9, Timothy, 6, and Monica, 4. He received a masters degree in physics from the University of Scranton in 1975.

Respiratory Therapy

Laura L. Hooker, '81, Augusta, is an instructor of respiratory therapy at MCG. She was selected as an Outstanding Young Woman of America in 1982.

Lynda T. Gates, '81, Augusta, is a respiratory therapy instructor at MCG. She was selected as an Outstanding Young Woman of America for 1982.

SCHOOL OF DENTISTRY

James A. Roos, '81, Smyrna, and wife, **Elizabeth,** DH, '74, have opened their practice for general dentistry.

Van B. Haywood, '74, Augusta, and wife, Angie, wish to announce the birth of their second child, David Wesley, born July 5, 1982. Also, Van's book "Learning to Play the Guitar with Christian Songs" is now available.

Karl F. Kinkel, '75, Independence, VA, has been the public health dentist in Grayson County since graduation from MCG.

Arthur H. Jeske, '78, is associate professor in the departments of pharmacology and operative dentistry, University of Texas Dental Branch, Houston.

Kim Henry, '80, Hapeville, GA, is currently deployed as a dental officer with MSSG-22, serving the U.S. Marines in Beruit, Lebanon.

William J. McLendon, '80, completed a general practice residency at Keesler AFB, Biloxi, MS, and is stationed at Gunter AFB, Montgomery, AL. He and his wife, Karla, have one son, Richard Kyle.

SCHOOL OF GRADUATE STUDIES

Eugene Norman Bruker, '62, Augusta, was the number one producer of promoted products in the Boehringer Ingelheim Limited line for the Charlotte, NC, district for the third consecutive year, and promoted to Senior Sales Representative. He is looking forward to the International Meeting of the company in Los Angeles with tours including the "Spruce Goose" and the Queen Mary.

William B. Westwood, MSMI, '72, Rochester, MN, started his own business and is successfully freelancing medical artwork. His work recently won several major awards at the annual Association of Medical Illustrators convention, Anaheim, CA.

Raymond M. Belknap, MSMI, '75, West Germany, is the chief of the Medical Illustration division which supports all U.S. Army Health Care Professionals in Europe.

John O. Manter, '76, North Augusta, SC, completed an associate degree in technical nursing, USC-Aiken, in December of 1982. He is an instructor and part-time employee at ETMH.

SCHOOL OF MEDICINE

Sam **E. Patton,** '37, Macon, retired December 30, 1982, and is enjoying traveling, working in the yard and garden, fishing, and church activities.

George G. Young, '38, took a seven day mission trip to Haiti last year and performed a great deal of surgery. He urges all of his classmates to become lifetime members of the Alumni Association. He resides in Chattanooga, TN.

Tracy Levy, '39, Miami, FL, retired from the military after 32½ years of active duty and three wars. He is enjoying Florida immensely and is looking forward to his class reunion in 1984.

Katrine Rawls Hawkins, '40, was named 1983 Citizen of the Year at the annual Ladies Night banquet of the Sylvania Rotary Club. The award has been presented by the Rotary Club since the 1940s to honor a citizen of Screven County who has made outstanding contributions to the advancement and welfare of the community.

Ben Keith Looper, '43 December, Canton, retired December, 1978.

Hubert U. King, '47, Daytona Beach, FL, retired as Executive Medical Director of the Volusia County Health Department after 15½ years of service. He has completed 32½ years of practice in Public Health and

CLASS NOTES

Preventive Medicine in various positions with the Georgia Department of Public Health, US Public Health Service and Florida Department of Public Health. He and his wife have six children and six grandchildren.

H. Richard Carter, '52, Clearwater, FL, retired from 26 years of private pediatric practice July 31, 1981. He is treasurer and board member of the Fortune Federal Savings and Loan; and manages the family partnership.

S. A. Shmerling, '53, Atlanta, has a son, Rick, who is in his fourth year at MCG School of Medicine. Rick married Karen Schatten in June, 1983.

Jesse L. Hunt, '55, is operating a free standing emergency clinic in Brunswick with three partners, and is extremely pleased with its success.

James C. Kataif, '55, Palatka, FL, is chief of staff and director of the emergency department at the Putnam Community Hospital; medical director of the Putnam County Emergency Rescue Service; medical consultant to the Georgia-Pacific Paper Company; treasurer and a board member of the Florida Chapter of American College of Emergency Physicians; and an affiliate faculty member to the American Heart Association, Florida chapter.

James H. Segars, '55, Knoxville, TN, is chairman of the ASSECT of Tennessee. He was elected to the Gyn-Laser Society and recently attended a meeting at Royal College, London. His son, Jim, is a general practitioner in Trenton.

William Cook, Jr., '57, Atlanta, has three daughters who have graduated from MCG. He also has two grandchildren.

Homer Leon Lassiter, Sr., '58, Arlington, has four sons: Homer, Jr., enters the MCG School of Medicine this fall, and is a graduate of Vanderbilt University; Sam, a Mercer University graduate, will enter Mercer Law School; and twins, David and Jonathan, attend University of Georgia and Valodsta State College, respectively.

I. Gene Schwarz, '60, Denver, is a faculty member, and training and supervising analyst at the Denver Institute for Psychoanalysis, Department of Psychiatry, University of Colorado Medical School.

LeRoy Fleming Smith, Jr., '60, Alexandria, VA, is chairman and a member of the Board of Trustees of the private practice committee of the Middle Atlantic Oncology Program. He is also associate director and professor of medicine at Georgetown University; a fellow to the American College of Physicians; and a diplomate to the ABIM.

Samuel M. Goodrich, '61, Milledgeville, and wife, Ellen, had their fourth child, Rachel Leigh. Goodrich is a member of the Southern Gynecological and Obstetrical Society.

James C. Lowe, Jr., '61, San Antonio, TX, is serving as president of the San Antonio Society of Otolaryngology.

B. Lamar Pilcher, '61, Warner Robins, practices radiology in his private office and the Medical Center of Houston County with **Wayne Bohanan,** '63.

James W. Jackson, '62, Savannah, is chief of staff at Memorial Medical Center.

Joseph A. Sangster, '64, Soldotna, AK, and classmates, **Estol Belflower** and **Alex Russell,** are all planning to attend their 20th reunion in May, 1984.

Freddie E. Wilson, '64, is director of internal medicine in the division of medical education at Greenville Hospital System.

Burford W. Culpepper, '65, Wilmington, DE, is medical director of the Du Pont Company, He is a diplomate of the American Board of Preventive Medicine, certified in aerospace medicine, occupational medicine and family practice.

Jack K. Tippens, '65, Washington, DC, is chief of orthopaedic surgery at Walter Reed Army Medical Center; director of orthopaedic surgery residency training program; orthopaedic consultant to the surgeon general; and, associate professor of surgery, Uniformed Services University School of Medicine, Bethesda, MD.

Mark Wilkiemeyer, '66, practices urology in Atlanta.

Robert M. Kelleher, '67, Atlanta, is in the practice of dermatology. He is president of the Atlanta Dermatological Association and secretary-treasurer of the Georgia Society of Dermatologists.

Harrison F. McDonald, '67, Solana Beach, CA, is in private practice of dermatology.

Carol F. Meyer, '67, Miami, FL, is an allergist/immunologist in the department of medicine, Gorgas Army Hospital, Republic of Panama. Her activities include the Panama Audubon Society and performing as a cellist with the Curundu Chamber Ensemble.

Judy I. Orosz, '71, has been included in the 1983-84 edition of Who's Who of American Women.

William O. Cornwell, '72, Ft. Oglethorpe, is board certified in family medicine. He is past president of Walker, Catoosa, Dade Medical Society and is serving on the executive committee of Hutcheson Memorial Tri-County Hospital.

Miles H. Mason, III, '72, Duluth, was initiated into the American College of Surgeons, October, 1982. He is chief of staff of Gwinnett County Hospital System. He and his wife, Sandy, had their third child, Miles, IV, born March 20, 1983.

Stuart J. Padove, '72, has received his subspecialty board certification in pulmonary medicine. Dr. Padove is currently practicing in Birmingham, AL, and is associated with Baptist Medical Center-Princeton. He also serves as the representative from the Alabama Thoracic Society to the interspecialty council of the medical association of the state of Alabama. He and his wife, Susan, have two children: Stacy, 6, and Mindy, 5.

John L. Taylor, '72, has been in the practice of ob-gyn in Tallahassee, FL, since 1979.

James R. Hagler, '74, Buena Vista, is a family practitioner. He and his wife, Kay, have three children: James, Jr., 4, Jennifer, 2, and Carlton, 1.

Herman Sessions, '74, is a family practitioner in Orange Park, FL.

Jim S. Simpson, '74, Lexington, KY, has moved his practice of diagnostic radiology to Central Baptist Hospital to be in charge of special interventional and invasive radiology.

J. David Lentz, III, '75, is board certified in the American Academy of Family Practice. He is in private practice in Snellville.

David Crippen, '76, Indianapolis, IN, is medical director at White County Memorial Hospital emergency department, and assistant medical director of Championship Auto Racing Teams, Inc.

John J. Dallman, '76, is chairman of the department of family practice at the University of Connecticut Health Center.

W. Arnold Batson, '77, has joined The Associates of Piedmont Orthopaedic Clinic, Greenville, SC.

David Retterbush, '77, Valdosta, completed his general surgery residency in August of 1982, at the University of Louisville, KY. He is in private practice in general and vascular surgery with his father.

David N. Walters, '77, Pineville, LA, is chief surgeon at 23rd TAC Hospital, England Air Force Base; and, is a diplomate of the American College of Surgeons. He is married to **Anne Skiscim,** BSN, '74, and has two children: Claire, 3, and Benjamin, 1.

Carol Weisman Beck, '78, and her husband, Dr. Jeffrey Beck, announce the birth of their son, Brian Joel, March 10, 1983. Carol is practicing pediatrics in Cleveland, OH.

Joseph R. Downs, III, '78, West Point, is practicing general internal medicine, and has three children: Will, 5, Emily, 3, and Ellen, 1.

Thomas Estes, '78, Moultrie, completed his general surgery residency at Georgia Baptist Medical Center in July, and entered private practice with Moultrie Surgical Associates. He and his wife, Jennie, have one son, Lane, Jr.

Craig Mitchell, '78, Augusta, and his

CLASS NOTES

wife announce the birth of their daughter, Diana Marie, born April 4, 1983. Craig is a fellow in cardiology at MCG.

Charles Daniel Proctor, '78, San Antonio, TX, completed his general surgery residency at the University of Kentucky in June. He has begun a fellowhsip in critical care at Wilford Hall Medical Center, Lackland AFB. He and his wife, Beth, have two children: Charley, 11, and Zackary, 4.

David S. Saffan, '78, is a fellow in reproductive endocrinology at Beth Israel Hospital, Boston, MA. He and his wife, Marian, are the proud parents of Michelle, born May 3, 1982.

Dennis Wayne Spencer, '78, Southbend, WA, is in the private practice of primary care, internal medicine. His is the chief of the coronary care unit, Willapa Harbor Hospital; and, is the father of four children.

Marie Faucher, '79, Conyers, completed her anesthesia residency at Emory University, and spent one year on the anesthesiology faculty at Grady Hospital. She started her private practice March 1, 1983.

Steven L. Moore, '79, Augusta, completed his pediatric residency and is clinical instructor in pediatrics at MCG. He and his wife have two sons.

Terry M. Varner, '79, Greenville, SC, and wife, Nancy, wish to announce the birth of their son, Zachary Dayton, born December 30, 1982.

Milton B. Ellis, '80, Ft. Lewis, WA, is in his fourth year of otolaryngology residency. He has one daughter, Sayre Elizabeth Joy.

Greg L. Jones, '80, Anniston, AL, completed his residency in family medicine and is assistant director of Anniston Family Practice Residency.

Thomas E. "Tee" Reeve, III, Jackson, MS, married **Danielle Marie Walton,** BSN, '82, June 4, 1983. Reeve is a surgical resident at the University of Mississippi Medical Center, and Dana works at Mississippi Baptist Medical Center in the cardiovascular surgical unit.

SCHOOL OF NURSING

Maidana K. Nunn, '58, Milledgeville, is the training coordinator for Medical Surgical Center, Central State Hospital.

Hazel Smith Mock, '59, Savannah, is Pharmaceutical Studies Coordinator with the Community Cardiovascular Council.

Margaret E. Birch, '75, Santee, CA, was commissioned Lt. Junior Grade, U.S. Navy, November, 1981. She attended OIS in Newport, RI, was assigned to the San Diego Naval Regional Medical Center, and promoted to lieutenant in August, 1982.

Anne Jeanette Coyle, '75, Marietta, is working part-time at the Cobb County Health Department. She and her husband, Bruce, have one son, Benjamin Powell Coyle, born July 30, 1982.

Wanda Howell Mitchell, '75, Augusta, and her husband, Crain, MD, have two children: Brad, 3, and Diana, born April 4, 1983.

Suzanne P. Bohler, '77, Augusta, is assistant chief nurse for evenings and nights at Eisenhower Army Medical Center.

David F. Marr, '77, Cleveland, TN, is IV team manager, HPI Health Care Services. David serves as vice-president of Cleveland State Community College Alumni Association, and is a member of the National Intravenous Therapy Association.

Pat Moss, '77, Augusta, is an assistant professor in the School of Nursing at MCG, and is a certified childbirth educator.

Willette Hendricks Strickland, '73, Albany, married **Samuel L. Strickland,** MD, '76, in June, 1980. Their daughter, Catherine Merida, was born May 18, 1981. Sam is with Radiology Associates.

Dianne Waters, '77, Atlanta, received her masters from Emory University in May, 1983. She is a staff nurse-midwife at Grady Hospital.

Joanne M. Diana, '77, Cleveland, OH, is employed at St. Alexis Hospital.

Mary E. "Mimi" Beasley, '78, is working in cardiovascular surgery at Emory Hospital, Atlanta. She will enter Emory University School of Medicine in the Fall of 1983.

Felice M. Knotts, '78, Crescent City, FL, is president of the Putnam County Chapter of the American Diabetes Association, a board member of the Putnam County Council on Aging, coordinator for a newly developing multi-purpose senior citizen center, and a member of the Putnam County Chamber of Commerce, the Business and Professional Women's Club, and the Putnam County Democratic Women.

Ruth M. Kooyman, '78, Maysville, KY, is an associate professor at the University of Kentucky School of Nursing.

Leanne Rickling, '79, Plantation, FL, married Thomas·Lampone, MD. She was chosen for the Humana Crisis Team for 1981.

Lucille M. Pogue, '80, Augusta, published "Computer-Assisted Instruction in the Continuing Education Process," Topics in Clinical Nursing, October, 1982.

Lorinda C. Bonnette, 81, Chamblee, is working in the young adult unit at Peachford Hospital.

DEATHS

Stewart D. Brown, Jr., MD, '49, Royston, GA

Thomas B. Carroll, Jr., MD, '57, Hardeeville, SC

William E. McDavid, Jr., MD, '53, Atlanta, GA

Ann M. Schindel, MD, '79, Chapel Hill, NC

J. Warrick Thomas, MD, '34, Richmond, VA

Future MCG Continuing Education Programs

EARLY SENILITY & ALZHEIMER'S DISEASE
October 20
Milledgeville, Georgia
Milledgeville Nurses
School of Nursing, MCG

NUTRITION FOR THE 80s
October 21-22
MCG Campus
School of Dentistry, MCG

ORTHOPEDIC NURSING
October 26-27
Augusta Hilton, Augusta, Georgia
School of Medicine, MCG

ORAL CANCER
October 27-28
DeSoto Hilton, Savannah, Georgia
School of Dentistry, MCG

PSYCHIATRIC NURSING
November 3-4
MCG Campus
Medical College of Georgia

PHARMACOLOGY
November 3
MCG Campus
School of Dentistry, MCG

IONTOPHORESIS
November 4
MCG Campus
School of Dentistry, MCG

IMPLANT DENTISTRY
November 5-6
MCG Campus
School of Dentistry, MCG; American Academy of Implant Dentistry and American Academy of Implant Dentistry Research Foundation

REVIEW COURSE IN OBSTETRICS & GYNECOLOGY
November 7-11
Augusta Hilton, Augusta, Georgia
School of Medicine, MCG

HOSPITAL SECURITY MANAGEMENT
November 9-11
MCG Campus
Medical College of Georgia

HELPING CHILDREN COPE WITH DEATH
November 10
Augusta, Georgia
School of Nursing, MCG

PSYCHOSOCIAL CARE OF THE PHYSICALLY ILL ADULT
November 11
Augusta, Georgia
School of Nursing, MCG

CRITICALLY ILL INFANT & CHILD
November 17-18
MCG Campus
Medical College of Georgia

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